

**UNITED STATES COURTS  
EASTERN DISTRICT OF NEW YORK  
QUALITY CONTROL CHECK  
ATTORNEY CASE OPENINGS**

| Corrections                                    |  |   |
|--|--|---|
| <b>Were Corrections made to this ACO case?</b> |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>1</b>                                       | Attorney did not complete the initiating documents.<br>Checked on <a href="http://www.nyed.circ2.dcn/cfm/ecf/atyopencase.cfm">http://www.nyed.circ2.dcn/cfm/ecf/atyopencase.cfm</a> to determine who the attorney was that attempted to file the case and contacted that attorney in order to retrieve Complaint, Cover Sheet, Summons, and payment information or to advise the attorney to file the initiating documents.  | <input type="checkbox"/>  |
| <b>2</b>                                       | Court Designation was incorrect. Copied case, changed Court designation, deleted incorrect case and advised other Court. This is in conjunction with Paragraph 10-NY-E Division of Business Rule 50.1(d)(2)  | <input type="checkbox"/>  |
| <b>3</b>                                       | Attorney did not separate the initiating document. Separated document into individual attachments. Replaced Main document and attached the cover sheet and Summons (if applicable).  | <input type="checkbox"/>  |
| <b>4</b>                                       | Attorney did not include <input type="checkbox"/> Complaint <input type="checkbox"/> Cover Sheet <input type="checkbox"/> Summons<br>Contacted attorney and retrieved missing document from attorney. <input type="checkbox"/>   | <input type="checkbox"/>  |
| <b>5</b>                                       | Attorney used <input type="checkbox"/> Incorrect Form of Summons <input type="checkbox"/> Defendant's name and address not completed <input type="checkbox"/> Plaintiff's attorney name and address not completed.<br><input type="checkbox"/> Caption on the summons does not match caption on the complaint.<br><input type="checkbox"/> Incorrect Date. <input type="checkbox"/> Incorrect Case Number<br>Contacted attorney and requested a corrected summons. | <input type="checkbox"/>  |
| <b>6</b>                                       | Attorney used incorrect event when docketing the initiating document.<br>Deleted document and re-docketed using the correct event.   | <input type="checkbox"/>  |
| <b>7</b>                                       | <input type="checkbox"/> Corrected Party Role <input type="checkbox"/> Party spelling<br><input type="checkbox"/> Added missing Party<br><input type="checkbox"/> Converted from All Caps to Initial Caps<br><input type="checkbox"/> Added party text <input type="checkbox"/> Removed party text <input type="checkbox"/> Added alias  | <input type="checkbox"/>  |
| <b>8</b>                                       | Corrected Short Title  | <input type="checkbox"/>  |
| <b>9</b>                                       | Corrected <input type="checkbox"/> Basis of Jurisdiction <input type="checkbox"/> Citizenship of Principal Parties<br><input type="checkbox"/> Nature of Suit <input type="checkbox"/> Cause of Action <input type="checkbox"/> Fee Status <input type="checkbox"/> County Code<br><input type="checkbox"/> Dollar Demand <input type="checkbox"/> Jury Demand <input type="checkbox"/> Class Action <input type="checkbox"/> Origin                               | <input type="checkbox"/>  |
| <b>10</b>                                      | NY-E Division of Business Rule 50.1(d)(2) was not completed. Contacted attorney and retrieved corrected cover sheet and replaced on docket sheet.  | <input type="checkbox"/>  |
| <b>11</b>                                      | Added case in other court to docket sheet.   | <input type="checkbox"/>  |
| <b>12</b>                                      | Added/Corrected Disclosure Statement question and response in docket entry   | <input type="checkbox"/>  |
| <b>13</b>                                      | Page 1, Question 1(b) Plaintiff's county of residence was not indicated  | <input type="checkbox"/>  |
| <b>14</b>                                      | Page 2, Question 2(c) was not completed or is inconsistent   | <input type="checkbox"/>  |
| <b>15</b>                                      | Certification of Arbitration Eligibility not completed   | <input type="checkbox"/>  |
| Other  |  | <input type="checkbox"/>  |